

PO Box 1034 **BANKSTOWN NSW 1885** T 02 9722 6613 F 02 8580 5792 registration@hrnsw.com.au www.hrnsw.com.au

HRNSW LICENCE UPGRADE APPLICATION

VOLUNTEER / PAID STABLEHAND TO C GRADE TRAINER / C GRADE DRIVER

LICENCE UPGRADE APPLICATION CHECKLIST													
Mark boxes with	either a	V or X as appropriate	e:										
l ho	I hold a current Volunteer or Paid Stablehand licence with HRNSW;												
l ha	I have attained the age of eighteen (18) years;												
l ha	I have held a Volunteer or Paid Stablehand Licence for a minimum of six (6) consecutive calendar months;												
l ha	I have undertaken a HRNSW medical assessment during the last six (6) calendar months (see note below);												
☐ Sch	I have recently graduated from the NSW Mini Trotters Program and wish to be provided with information regarding the Mini Trotters Progression Scheme Policy Statement to assist in determining whether I am eligible for consideration for subsidisation of licencing and online licence training fees.												
of the o	overall lic	hold a Driving Stablehan sence upgrade process. If e Application (Medical As:	you curre	ently hold a Non-Drivi i	ng Stableh	and licen	ce, you <u>wi</u>	i <u>ll</u> be re	equired to ι	ındertake d	and submi	it a Medic	al Assessment with th
nformation and/o	or unde on rega om.au o	ograde Applications surtakings on your part part produced in the requirement of the contacting Harness	prior to	a Licence Upgrade A	Application	on being le you h	consider ave appli	red or	approved	l. ained in tl	ne HRSN	W Licen	cing Policy (availabl
	ived du	 6 weeks for the pring the annual renew 		- :					-	_	-		
				APPLICA	ANT INFO	ORMA	ION						
Title		Surname		Given Names									
Residential Add	ress					<u> </u>							Post Code
Postal Address (if differ	ent from residential)											Post Code
Home Phone				Work Phone				Fax Nu			mber		
Mobile Number	•			Date of Birth			Place of Birth						
email address							L						
Signature of App]	Date					Lic	ence Nu	mher

Please ensure that the information specified on the reverse of this form is provided before submitting this Licence Upgrade Application to HRNSW

Mandatory Provision of Tax File Number / Bank Account Information

						TAX	FILE NUI	MBER							
licencing upg	provision of your process nay result in Ha	and that fail	lure to provi	ide this in	formatio	n will resul	t in your licer	ce applicati	on being retu	irned to you ur	equirements nprocessed	s of the Harnes . Failure to pro	ss Racing NSW ovide your TFN		
					-										
BANK ACCOUNT INFORMATION															
Account Name :															
Bank / B	ranch :														
BSB															
Account															
	unless the Sta payable). ade fees will r	blehand lic	ence was i	ssued mo	ore than	nine moi	nths prior to	the submis	ssion date of	_			e Drivers licence all licence fee o		
)									
Paid Stablehand, Driving (Over 18)					\$ 340										
Volunteer Stablehand, Non-Driving (Over 18) *					\$ 340										
Paid Stablehand, Non-Driving (Over 18) *						\$ 340									
* holders of cu	rrent Non-Drivin	ng Stablehand	licences will	be require	ed to und	ertake a Me	edical Assessme	ent and subm	it the complete	ed assessment v	vith this Licer	nce Upgrade Ap	plication.		
CREDIT CARD PAYMENT OPTION (VISA OR MASTERCARD ONLY)															
Card Numbe	er:														
Expiry Date	:					CVV (3 digi:	t value printed	on back of o	card)		\$				
Cardholders Name : Cardholders Signature:															
OFFICE USE ONLY															
Custom	ner Code				Invoic	e Number				Licen	ce Number				